



Complete Summary

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TITLE

Childhood immunizations (full coverage): percent of enrolled children who received all of the following by the measure end date: four DTaP, DT, or DTP with different dates of service, or some combination of DTaP, DTP or DTP/DT vaccines adding up to 4 doses, three polio (IPV/OPV) vaccinations with different dates of service, one measles vaccination, one mumps vaccination, one rubella vaccination or one MMR vaccination, one varicella (VZV) vaccination, three H influenza type B (Hib) vaccinations, three hepatitis B vaccinations (MEDDIC-MS).

SOURCE(S)

Department of Health and Family Services, Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS. Medicaid encounter data driven improvement core measure set. Madison (WI): State of Wisconsin; 2003 Jan 1. 47 p.

Brief Abstract

DESCRIPTION

This measure assesses the percentage of enrolled children age 23 months to 25 months, 30 days of age at the measure end date, who received all of the following by the measure end date:

- Four diphtheria, tetanus, acellular pertussis (DTaP), diphtheria, tetanus (DT), or diphtheria, tetanus, pertussis (DTP) with different dates of service, or some combination of DTaP, DTP or DTP/DT vaccinations adding up to 4 doses
- Three polio (IPV/OPV) vaccinations with different dates of service
- One measles vaccination
- One mumps vaccination
- One rubella vaccination
- One measles, mumps, rubella (MMR) vaccination
- One varicella (VZV) vaccination
- Three Haemophilus influenza type B (Hib) vaccinations
- Three hepatitis B vaccinations.

See the related NQMC measure summary, [Childhood immunizations \(partial coverage\) \(MEDDIC-MS\)](#).

RATIONALE

Immunization of young children is known to be one of the most cost-effective health services available and is essential in the management of vaccine-preventable diseases.

The overall objective for the Childhood Immunization Measure measure is to reach and sustain full immunization of 90 percent of children two years of age (Healthy People 2010 goal for attainment by 2010). Full immunization as defined by this measure is based on applicable recommendations of the Centers for Disease Control Advisory Committee on Immunization Practices (CDC-ACIP), issued January 2002.

PRIMARY CLINICAL COMPONENT

Vaccine-preventable diseases; childhood immunizations; diphtheria; tetanus; pertussis; polio; measles; mumps; rubella; varicella; Haemophilus influenza type B; hepatitis B

DENOMINATOR DESCRIPTION

Medicaid/BadgerCare enrollees age 23 months to 25 months, 30 days of age at the measure end date who were enrolled at birth or within 45 days of birth and continuously enrolled with the same health maintenance organization (HMO) a total of at least 609 days prior to the measure end date with no more than one gap in enrollment of not more than 45 days in the period of enrollment.

NUMERATOR DESCRIPTION

The number of children in the denominator who received all of the following by the measure end date: four diphtheria, tetanus, acellular pertussis (DTaP), diphtheria, tetanus (DT) or diphtheria, tetanus, pertussis (DTP) with different dates of service, or some combination of DTaP, DTP or DTP/DT vaccines adding up to 4 doses; three polio (IPV/OPV) vaccinations with different dates of service; one measles vaccination, one mumps vaccination, one rubella vaccination or one measles, mumps, rubella (MMR) vaccination; one varicella (VZV) vaccination; three Haemophilus influenza type B (Hib) vaccinations, three hepatitis B vaccinations.

Evidence Supporting the Measure

PRIMARY MEASURE DOMAIN

Process

SECONDARY MEASURE DOMAIN

Access

EVIDENCE SUPPORTING THE MEASURE

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences

NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [General recommendations on immunization: recommendations of the Advisory Committee on Immunization Practices \(ACIP\) and the American Academy of Family Physicians \(AAFP\).](#)

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS data book. Medicaid encounter data driven improvement core measure set. Vol. 1, 2002 HMO aggregate performance data. Wisconsin Medicaid and BadgerCare programs. Milwaukee (WI): Wisconsin Department of Health and Family Services; 2004 Feb 1. 31 p.

Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS data book. Medicaid encounter data driven improvement core measure set. Vol. 3, 2002 HMO-specific performance data. Wisconsin Medicaid and BadgerCare programs. Madison (WI): Wisconsin Department of Health and Family Services; 2004 Feb 1. 36 p.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Decision-making by consumers about health plan/provider choice
External oversight/Medicaid
External oversight/State government program
Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Managed Care Plans

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses
Nurses
Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Children 23 months to 25 months, 30 days of age at the measure end date

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Immunization rates according to the Centers for Disease Control (CDC) National Immunization Survey (NIS):

	1996	2000
4 doses of diphtheria-tetanus-pertussis containing vaccine	81%	94.1%
3 doses of Haemophilus influenza type B (Hib) vaccine	93%	93.4%
1 dose of measles, mumps, rubella (MMR) vaccine	91%	90.5%
3 doses of hepatitis B vaccine (HBV)	84%	90.3%
1 dose of varicella (chicken pox) zoster virus (VZV) vaccine	26%	67.8%
3 doses of poliomyelitis (IPV or OPV) vaccine	91%	89.5%
Combination of 4 DTP, 3 polio, 1 MMR, 3 Hib vaccines	76%	76.2%

EVIDENCE FOR INCIDENCE/PREVALENCE

Department of Health and Family Services, Division of Health Care Financing,
Bureau of Managed Health Care Programs. MEDDIC-MS. Medicaid encounter data
driven improvement core measure set. Madison (WI): State of Wisconsin; 2003
Jan 1. 47 p.

ASSOCIATION WITH VULNERABLE POPULATIONS

Young, low income children are at risk for being medically underserved, including basic primary care services such as immunizations.

EVIDENCE FOR ASSOCIATION WITH VULNERABLE POPULATIONS

Vaccines for children: barriers to immunization [GAO/T-PEMD-95-21]. Washington (DC): United States General Accounting Office; 1995 May 4. 10 p.

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Both users and nonusers of care

DESCRIPTION OF CASE FINDING

Medicaid/BadgerCare enrollees age 23 months to 25 months, 30 days of age at the measure end date who were enrolled at birth or within 45 days of birth and continuously enrolled with the same health maintenance organization (HMO) a total of at least 609 days prior to the measure end date with no more than one gap in enrollment of not more than 45 days in the period of enrollment.

DENOMINATOR SAMPLING FRAME

Enrollees or beneficiaries

DENOMINATOR (INDEX) EVENT

Patient Characteristic

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Medicaid/BadgerCare enrollees age 23 months to 25 months, 30 days of age at the measure end date who were enrolled at birth or within 45 days of birth and continuously enrolled with the same health maintenance organization (HMO) a total of at least 609 days prior to the measure end date with no more than one gap in enrollment of not more than 45 days in the period of enrollment.

Exclusions

Unspecified

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

The number of children in the denominator who received all of the following by the measure end date:

- Four diphtheria, tetanus, acellular pertussis (DTaP), diphtheria, tetanus (DT), or diphtheria, tetanus, pertussis (DTP) with different dates of service, or some combination of DTaP, DTP or DTP/DT vaccinations adding up to 4 doses
- Three polio (IPV/OPV) vaccinations with different dates of service
- One measles vaccination, one mumps vaccination, one rubella vaccination or one measles, mumps, rubella (MMR) vaccination
- One varicella (VZV) vaccination
- Three Haemophilus influenza type B (Hib) vaccinations
- Three hepatitis B vaccinations.

Refer to the original measures document for Current Procedure Terminology 4 (CPT-4), CPT 2001 and International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) codes.

Exclusions

Exclude enrollees with documented contraindications ICD-9-CM V64.0.

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

External comparison of time trends

Internal time comparison

Prescriptive standard

PRESCRIPTIVE STANDARD

Program-wide 2002 aggregate baselines and 2004 performance goals (with input from participating health maintenance organizations [HMOs] based on aggregate baselines) to be established. Goals will be ramped up over time to progressively drive performance improvement. Overall system-wide goal is 90% of children meeting the denominator criteria fully immunized by 2010 (Healthy People 2010).

EVIDENCE FOR PRESCRIPTIVE STANDARD

Department of Health and Family Services, Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS. Medicaid encounter data driven improvement core measure set. Madison (WI): State of Wisconsin; 2003 Jan 1. 47 p.

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

This measure was tested and validated by an independent third party and subject to internal review in 2002.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Innovative Resources Group (IRG). Measure testing/validation reports for MEDDIC-MS. Brookfield (WI): Innovative Resources Group (IRG); 2002.

Identifying Information

ORIGINAL TITLE

Childhood immunizations.

MEASURE COLLECTION

[MEDDIC-MS \(Medicaid Encounter Data Driven Improvement Core Measure Set\). Rapid-cycle performance improvement measures system for Medicaid managed care.](#)

MEASURE SET NAME

[MEDDIC-MS \(Medicaid Encounter Data Driven Improvement Core Measure Set\). Measures applicable to AFDC/HS \(Medicaid\) and SCHIP \(BadgerCare\).](#)

MEASURE SUBSET NAME

[Targeted Performance Improvement Measures \(TPIM\)](#)

DEVELOPER

State of Wisconsin, Department of Health and Family Services

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Jan

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Department of Health and Family Services, Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS. Medicaid encounter data driven improvement core measure set. Madison (WI): State of Wisconsin; 2003 Jan 1. 47 p.

MEASURE AVAILABILITY

The individual measure, "Childhood Immunizations," is published in "Medicaid Encounter Data Driven Improvement Core Measure Set (MEDDIC-MS)."

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COMPANION DOCUMENTS

The following are available:

- Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS data book. Medicaid encounter data driven improvement core measure set. Vol. 1, 2002 HMO aggregate performance data. Wisconsin Medicaid and BadgerCare programs. Madison (WI): Wisconsin Department of Health and Family Services; 2004 Feb 1. 31 p. This document is available in Portable Document Format (PDF) from the [Wisconsin Medicaid Managed Care Web site](#).
- Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS data book. Medicaid encounter data driven improvement core measure set. Vol. 2, 2002 HMO performance data. Medicaid program data and BadgerCare program data compared. Madison (WI): Wisconsin Department of Health and Family Services; 2004 Feb 1. 25 p. This document is available in PDF from the [Wisconsin Medicaid Managed Care Web site](#).
- Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS data book. Medicaid encounter data driven improvement core measure set. Vol. 3, 2002 HMO-specific performance data. Wisconsin Medicaid and BadgerCare programs. Madison (WI): Wisconsin Department of Health and Family Services; 2004 Feb 1. 36 p. This document is available in PDF from the [Wisconsin Medicaid Managed Care Web site](#).

NQMC STATUS

This NQMC summary was completed by ECRI on October 9, 2003. The information was verified by the measure developer on October 14, 2003.

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The logo for FIRSTGOV, with "FIRST" in blue and "GOV" in red, and a small red star above the "I".

